Case 17-29142 Doc 1 Filed 09/29/17 Entered 09/29/17 08:44:19 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		a Joint Case):
1.	Your full name				
	Write the name that is or your government-issued picture identification (for example, your driver's license or passport).	Aimee First name M Middle name	First name Middle name		
	Bring your picture identification to your meeting with the trustee.	Martin Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	III)	1)
2.	All other names you ha				
	Include your married or maiden names.				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-5154			

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Case number (if known)

Debtor 1 Aimee M Martin

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	41 Sorrento Palos Heights, IL 60463 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Aimee M Martin

ar	Tell the Court About	Your E	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required</i> f page 1 and check the appropri	by 11 U.S.C. § 342(b) for Individuals Filing for I	3ankruptcy	
	choosing to file under	■ Chapter 7						
		□с	Chapter 11					
		□с	hapter 12					
		Πс	Chapter 13					
3.	How you will pay the fee		about how yo	u may pay. Туր attorney is sub	pically, if you are paying the fee	neck with the clerk's office in your local court for yourself, you may pay with cash, cashier's che ehalf, your attorney may pay with a credit card	eck, or money	
					tallments. If you choose this o	ption, sign and attach the Application for Individ	duals to Pay	
			ū		,	tion only if you are filing for Chapter 7. By law,	a judge may,	
			applies to you	ur family size a	nd you are unable to pay the fe	your income is less than 150% of the official pe in installments). If you choose this option, you flicial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No	0.					
	last 8 years?	☐ Ye						
			District		When			
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No	0					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	∋s.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District	-	When	Case number, if known		
11.	Do you rent your residence?	■ No	o. Go to li	ine 12.				
		□ Ye	_{es.} Has yo	ur landlord obt	ained an eviction judgment aga	inst you and do you want to stay in your reside	nce?	
				No. Go to line	12.			
				Yes. Fill out Inbankruptcy pe		on Judgment Against You (Form 101A) and file	it with this	

Document Page 4 of 60 Case number (if known) Aimee M Martin Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Aimee M Martin Document Page 5 of 60 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Aimee M Martin		Document	———	Case number (if	known)
Part	6: Answer These Quest	ions for Re	porting Purposes			
16.	What kind of debts do you have?		Are your debts primarily cons			in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
			Are your debts primarily busi money for a business or investr			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe	that are not consume	er debts or business d	ebts
17.	Are you filing under Chapter 7?	□ No.	am not filing under Chapter 7.	Go to line 18.		
	Do you estimate that after any exempt		am filing under Chapter 7. Do are paid that funds will be availa			v is excluded and administrative expenses
	property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		□ No			
			Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	\$1,000,001 - \$ \$10,000,001 - \$ \$50,000,001 - \$ \$100,000,001	\$50 million \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
20.	How much do you estimate your liabilities to be?	\$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$ □ \$10,000,001 - □ \$50,000,001 - □ \$100,000,001	\$50 million \$100 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
Part	7: Sign Below					
For	you	I have exa	mined this petition, and I declar	re under penalty of per	rjury that the informati	on provided is true and correct.
		United Sta If no attorn document, I request rule in the state of the	tes Code. I understand the relievely represents me and I did not I have obtained and read the number of the chain of making a false statement, cover case can result in fines up to \$1.00 Martin Martin of Debtor 1	ef available under each pay or agree to pay so notice required by 11 U upter of title 11, United concealing property, or o \$250,000, or imprisonr	omeone who is not an U.S.C. § 342(b). States Code, specifie obtaining money or present for up to 20 year signature of Debtor 2	der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7. In attorney to help me fill out this ed in this petition. Property by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Executed	September 29, 2017 MM / DD / YYYY		Executed on MM / D	D / YYYY
					, =	

Debtor 1 Aimee M Martin Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Frank L	Vosholler III	Date	September 29, 2017	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Frank I V	osholler III			
Printed name	Continue in			
The Law C	Office of Frank L. Vosholler III			
17726 Oak	R Park Ave.			
Unit J				
Tinley Par	k, IL 60477			
Number, Street,	City, State & ZIP Code			
Contact phone	708-341-2060	Email address	flv@frankvlaw.com	
6292054				
Bar number & S	tate			

		1700.11111	tii Paue o ui oi	
Fill in this infor	mation to identify your	case:		
Debtor 1	Aimee M Martin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	70,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	43,638.03
	1c. Copy line 63, Total of all property on Schedule A/B	\$	113,638.03
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	117,682.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	24,976.62
	Your total liabilities	\$	142,658.62
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,002.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,922.30
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
	■ Yes		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Page 9 of 60 Case number (if known) Debtor 1 Aimee M Martin

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

6,194.28 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Cohodula E/E compthe followings	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	С	ase 17-29142	2 Doc 1	Filed 09		Entered 09/29/1	7 08:44:19	Desc	c Main
Fill	in this info	mation to identify	your case and t						
Deb	otor 1	Aimee M Mar	tin						
		First Name	Midd	lle Name		Last Name			
	otor 2 use, if filing)	First Name	Midd	lle Name		Last Name			
Unit	ted States B	ankruptcy Court for t	the: NORTHER	RN DISTRIC	CT OF ILLIN	OIS			
Cas	se number								Check if this is an
									amended filing
) Of	ficial Fo	orm 106A/B							
Sc	chedu	le A/B: Pr	operty						12/15
nfor	mation. If mo ver every que	re space is needed, a estion.	ttach a separate s	sheet to this	form. On the	are filing together, both are top of any additional pages n or Have an Interest In			
De	o vou own or	have any legal or equ	iitahle interest in	any residenc	e huilding	land, or similar property?			
		, , , ,	inabio intoroot in	any recidence	o, bananig,	and, or climal property.			
	No. Go to Pa								
	Yes. vvnere	is the property?							
1.1				What is t	the property	? Check all that apply			
	41 Sorre			_ 🔲 Si	ingle-family h	ome	Do not deduct se	cured claim	s or exemptions. Put
	Street address	s, if available, or other desc	ription	□ Di	uplex or multi	-unit building			laims on Schedule D: Secured by Property.
				■ Co	ondominium (or cooperative			
					anufactured of	or mobile home	Current value of	the	Current value of the
	Palos He	ights IL	60463-0000	_ La	and		entire property?	I	portion you own?
	City	State	ZIP Code	_	vestment pro	perty	\$140,00	0.00	\$70,000.00
				_	imeshare ther				r ownership interest cy by the entireties, or
					an interest	in the property? Check one	a life estate), if h	-	by the chareties, or
	Cook			_ D	ebtor 2 only				
	County			□ De	ebtor 1 and D	ebtor 2 only	Check if thi	s is comm	unity property
						the debtors and another	(see instructio	ns)	
					formation yo identificatio	u wish to add about this iter n number:	n, such as local		
				Townh					

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$70,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Case 17-29142

Doc 1

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Del	btor 1	Aimee M Mar	rtin		Document	Page 12 of 60 _{Cas}	se number (if known)	
[□ Yes.	Describe						
	Clothes							
_			othes, fur	s, leather coats, des	signer wear, shoes	, accessories		
ı	Yes.	Describe						
			Clothi posse		btors at debtors	s' residence and in de	ebtors'	\$800.00
ı	No		welry, cos	stume jewelry, enga	igement rings, wed	ding rings, heirloom jewel	iry, watches, gems, ς	jold, silver
ı	Examp ■ No	rm animals //es: Dogs, cats, b Describe	oirds, hor	ses				
14.	Any otl		d housel	nold items you did	not already list, i	ncluding any health aids	s you did not list	
	■ No □ Yes.	Give specific info	ormation.					
15.				our entries from F		ny entries for pages you	ı have attached	\$2,350.00
Par	t 4: Des	scribe Your Financ	cial Asset	s				
Do	you ow	n or have any le	egal or e	quitable interest ir	n any of the follow	ring?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	No			our wallet, in your h		osit box, and on hand whe	en you file your petiti	on
_	Examp			other financial acc ve multiple account		of deposit; shares in credit stitution, list each.	t unions, brokerage h	nouses, and other similar
	□ No ■ Yes				Institution r	name:		
			17.1.	Checking	Private B	ank		\$300.00
				ly traded stocks ent accounts with br	okerage firms, moi	ney market accounts		
_				Institution or issuer	name:			
19.	Non-pu joint v		ock and	interests in incorp	orated and uninc	orporated businesses, i	ncluding an interes	t in an LLC, partnership, and
_	■ No □ Yes.	Give specific info		about themne of entity:		%	of ownership:	
_	Negoti	able instruments	include p	ersonal checks, ca	shiers' checks, pro	egotiable instruments missory notes, and mone by signing or delivering th		

Official Form 106A/B Schedule A/B: Property page 3

		Case 17-29142	2 DOC 1	Poolimont	Dago 12 of 60	4.19 L	Desc Main
D	ebtor 1	Aimee M Martin		Document	Page 13 of 60 Case number (i	if known) _	
	☐ Yes.	Give specific information Iss	about them suer name:				
21		nent or pension accour oles: Interests in IRA, ER		(k), 403(b), thrift saving	s accounts, or other pension or profit-	-sharing pla	ns
	Yes.	List each account separa Type	itely. of account:	Institution r	ame:		
				401K			\$27,988.03
22	Your sl		its you have mad		inue service or use from a company ttric, gas, water), telecommunications	s companies	s, or others
				Institution r	ame or individual:		
23	. Annuit i ■ No	ies (A contract for a perio	odic payment of	money to you, either fo	life or for a number of years)		
	Yes	Issuer nar	ne and description	on.			
24	26 U.S.0	s in an education IRA, i C. §§ 530(b)(1), 529A(b),		n a qualified ABLE pro	gram, or under a qualified state tui	ition progra	am.
	■ No □ Yes	Institution	name and descr	ription. Separately file th	e records of any interests.11 U.S.C.	§ 521(c):	
25	■ No	equitable or future into		ty (other than anythin	g listed in line 1), and rights or pov	vers exerci	isable for your benefit
26	Examp ■ No		nes, websites, pr		al property nd licensing agreements		
		Give specific information					
27	Examp ■ No		clusive licenses,		n holdings, liquor licenses, profession	al licenses	
	☐ Yes.	Give specific information	about them				
M	oney or	property owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28		unds owed to you					
	■ No □ Yes.	Give specific information	about them, incl	luding whether you alre	ady filed the returns and the tax years	S	
29	■ No	oles: Past due or lump su		sal support, child supp	ort, maintenance, divorce settlement,	property se	ottlement
	⊔ Yes.	Give specific information					
30	Examp	amounts someone owe oles: Unpaid wages, disal benefits; unpaid loa	oility insurance p		efits, sick pay, vacation pay, workers	s' compensa	ation, Social Security
	■ No □ Yes.	Give specific information	١				

Official Form 106A/B Schedule A/B: Property page 4

	Case 17-29142	Document	Page 14 of 60_	Desc Main
Debtor 1	Aimee M Martin	Document	Case number (if known)	
	sts in insurance policies ples: Health, disability, or life	insurance; health savings account	(HSA); credit, homeowner's, or renter's insurar	nce
■ No				
☐ Yes.		ny of each policy and list its value. Pany name:	Beneficiary:	Surrender or refund value:
If you somed		ue you from someone who has dig trust, expect proceeds from a life in	ed nsurance policy, or are currently entitled to rece	eive property because
Exam _l ■ No —		ther or not you have filed a lawsu disputes, insurance claims, or right	iit or made a demand for payment s to sue	
34. Other	contingent and unliquidate	d claims of every nature, includir	ng counterclaims of the debtor and rights to	set off claims
■ No				
☐ Yes.	Describe each claim			
■ No	nancial assets you did not Give specific information	already list		
ப 163.	Oive specific information			
	-		ny entries for pages you have attached	\$28,288.03
Part 5: De	scribe Any Business-Related	Property You Own or Have an Interest	In. List any real estate in Part 1.	
37. Do you	own or have any legal or equit	able interest in any business-related p	property?	
No. Go	o to Part 6.			
☐ Yes. (Go to line 38.			
	escribe Any Farm- and Comme you own or have an interest in fa	rcial Fishing-Related Property You Ow mland, list it in Part 1.	n or Have an Interest In.	
46. Do vo i	u own or have any legal or	equitable interest in any farm- or	commercial fishing-related property?	
•	Go to Part 7.			
☐ Yes	s. Go to line 47.			
Part 7:	Describe All Property You C	own or Have an Interest in That You Di	d Not List Above	
	u have other property of ar ples: Season tickets, country	y kind you did not already list? club membership		
■ No				
☐ Yes.	Give specific information			

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

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Case number (if known) Document Debtor 1 **Aimee M Martin**

List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$70,000.00 Part 2: Total vehicles, line 5 56. \$13,000.00 Part 3: Total personal and household items, line 15 57. \$2,350.00 58. Part 4: Total financial assets, line 36 \$28,288.03 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$43,638.03 \$43,638.03 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$113,638.03

Official Form 106A/B Schedule A/B: Property page 6

		1700.0000	III FAUE IU UI U	1()
Fill in this infor	rmation to identify your	case:		
Debtor 1	Aimee M Martin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	ount of the exemption you claim	Specific laws that allow exemption
41 Sorrento Dr. Palos Heights, IL 60463 Cook County Townhouse Line from <i>Schedule A/B</i> : 1.1	\$70,000.00	\$15,000.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
41 Sorrento Dr. Palos Heights, IL 60463 Cook County Townhouse Line from Schedule A/B: 1.1	\$70,000.00	\$2,150.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Household furniture Line from Schedule A/B: 6.1	\$1,200.00	\$1,200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
All other household goods Line from Schedule A/B: 6.2	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Clothing owned by debtors at debtors' residence and in debtors' possession. Line from Schedule A/B: 11.1	\$800.00	\$800.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)

Document Page 17 of 60 Aimee M Martin Case number (if known) Debtor 1 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: Private Bank** 735 ILCS 5/12-1001(b) \$300.00 \$300.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401K 735 ILCS 5/12-1006 \$27,988.03 \$27,988.03 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

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Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Case 17-29142

Doc 1

		Document	Page 18	of 60		
Fill in this informa	tion to identify you	ır case:				
Debtor 1	Aimee M Martin		,			
DCDIOI 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bank	ruptcy Court for the:	: NORTHERN DISTRICT OF ILL	INOIS			
Officed States Barik	ruptcy Court for the.	NORTHERN DISTRICT OF IEL	-114015			
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
~						
Official Form	<u>106D</u>					
Schedule D): Creditors	Who Have Claims	Secured	by Propert	٧	12/15
				- 3 - 1	<i></i>	
		If two married people are filing togeth out, number the entries, and attach it				
number (if known).	additional Lago, IIII IC	out, number the entires, and attach it	to this form. On	tile top of any additio	nai pages, write your na	inc and case
1. Do any creditors ha	ave claims secured by	y your property?				
☐ No. Check the	nis box and submit t	his form to the court with your other	· schedules. Yo	ou have nothing else t	o report on this form.	
_	Il of the information	•				
		below.				
Part 1: List All S	Secured Claims			O-1 A	Oak was D	0-1
		more than one secured claim, list the cre		Column A	Column B	Column C
		s a particular claim, list the other creditor cal order according to the creditor's nam		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
		ū		value of collateral.	claim	If any
	londa Finance	Describe the property that secures		\$13,001.00	\$13,000.00	\$1.00
Creditor's Name		2015 Honda Civic 18101 mil	es			
		Value beand on John com				
		Value based on kbb.com As of the date you file, the claim is:	Check all that			
	Blvd Ste 100	apply.	Crieck all triat			
Elgin, IL 60	123	☐ Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
	_	Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	ured		
Debtor 2 only		car loan)				
Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this clair		☐ Other (including a right to offset)				
community debt						
	Opened					
	01/16 Last					
	Active		7400			
Date debt was incurr	ed 8/21/17	Last 4 digits of account num	_{ber} 7139			
2.2 First Midwe	st Bank/na	Describe the property that secures	the claim:	\$104,681.00	\$140,000.00	\$0.00
Creditor's Name		41 Sorrento Dr. Palos Heigh	ıts, IL			
		60463 Cook County				
		Townhouse				
300 N Hunt		As of the date you file, the claim is: apply.	Check all that			
Gurnee, IL 6	60031	☐ Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
	_	☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or seci	ured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, me	chanic's lien)			
At least one of the	dobtors and another	☐ Judgment lien from a lawquit				

Official Form 106D

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Debtor 1 Aimee M I	Martin		Case number (if know)		
First Name	Middle Na	me Last Name			
☐ Check if this claim re	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 04/10 Last Active 8/01/17	Last 4 digits of account number	0001		
	of your form, add t	lumn A on this page. Write that number he dollar value totals from all pages.	here:	\$117,682.00 \$117,682.00	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	0430 17 23142	Document	Page 20 of 60	00.44.10	o mani
Fill in this	s information to identify your				
Debtor 1	Aimee M Martin				
20010.	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	LINOIS		
Case num	ber				
(if known)				_ c	heck if this is an
				a	mended filing
Official	Form 106E/F				
		ho Have Unsecured	Claims		12/15
any execute Schedule G Schedule D left. Attach name and c	ory contracts or unexpired leases : Executory Contracts and Unexp : Creditors Who Have Claims Sec the Continuation Page to this pag ase number (if known).	e Part 1 for creditors with PRIORIT that could result in a claim. Also li ired Leases (Official Form 106G). Dured by Property. If more space is e. If you have no information to rep	ist executory contracts on Sche To not include any creditors with needed, copy the Part you need,	dule A/B: Property (Offician n partially secured claims number the entice of the entire of the entir	al Form 106A/B) and on that are listed in tries in the boxes on the
	List All of Your PRIORITY Un				
	creditors have priority unsecure	d claims against you?			
■ No.	Go to Part 2.				
☐ Yes	3.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any	creditors have nonpriority unsec	ured claims against you?			
□ No.	You have nothing to report in this pa	art. Submit this form to the court with	your other schedules.		
■ Yes	3.				
unsecu	ired claim, list the creditor separately	aims in the alphabetical order of th	d, identify what type of claim it is. D	o not list claims already inc	luded in Part 1. If more
					Total claim
4.1 A	CL Laboratories	Last 4 digits of acc	ount number 2052		\$6.41
	onpriority Creditor's Name	When was the debt	t inquerod?	_	
	.O. Box 27901 /est Allis, WI 53227-0901	when was the debt	. incurred?		
	umber Street City State Zlp Code	As of the date you	file, the claim is: Check all that ap	pply	
W	ho incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	f l At least one of the debtors and and	other Type of NONPRIOR	RITY unsecured claim:		
	Check if this claim is for a comm	nunity			
	ebt		ng out of a separation agreement o	or divorce that you did not	
	the claim subject to offset?	report as priority clai	ms or profit-sharing plans, and other	eimilar dehte	
	No				
	l Yes	Other. Specify			

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Debtor 1 Aimee M Martin Case number (if know) 4.2 \$37.74 **ACL Laboratories** Last 4 digits of account number 603A Nonpriority Creditor's Name P.O. Box 27901 When was the debt incurred? West Allis, WI 53227-0901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **ACL Laboratories** 603B Last 4 digits of account number \$62.14 Nonpriority Creditor's Name P.O. Box 27901 When was the debt incurred? West Allis, WI 53227-0901 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.4 **Advocate Christ Medical Center** Last 4 digits of account number 6687 \$969.14 Nonpriority Creditor's Name P.O. Box 4256 When was the debt incurred? Carol Stream, IL 60197-4256 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

Document Page 22 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.5 \$0.00 Bby/cbna Last 4 digits of account number 7186 Nonpriority Creditor's Name Opened 05/15 Last Active Po Box 6497 When was the debt incurred? 6/19/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.6 **Buckle** Last 4 digits of account number 1198 \$453.31 Nonpriority Creditor's Name When was the debt incurred? P.O. BOX 659704 San Antonio, TX 78265-9704 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.7 **Capital One** 9480 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 1/28/09 Last Active Po Box 30253 12/20/11 When was the debt incurred? Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

☐ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 23 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.8 \$0.00 Cbna Last 4 digits of account number 1379 Nonpriority Creditor's Name Opened 11/96 Last Active Po Box 6282 When was the debt incurred? 5/01/98 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Charge Account 4.9 **Chase Auto** Last 4 digits of account number 5584 \$0.00 Nonpriority Creditor's Name Opened 09/10 Last Active Po Box 901003 When was the debt incurred? 3/07/13 Ft Worth, TX 76101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Automobile 4.1 3618 Citi Last 4 digits of account number \$3,518.00 Nonpriority Creditor's Name Opened 12/11 Last Active Po Box 6241 When was the debt incurred? 7/13/17 Sioux Falls, SD 57117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

report as priority claims

■ Other. Specify Credit Card

 \square Obligations arising out of a separation agreement or divorce that you did not

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 24 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.1 \$501.00 Comenity Bank/buckle 1198 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/13 Last Active Po Box 182789 When was the debt incurred? 6/27/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes Comenity Bank/express 6867 \$1,415.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/11 Last Active Po Box 182789 When was the debt incurred? 7/13/17 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Comenity Bank/limited 6095 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/12 Last Active Po Box 182789 When was the debt incurred? 4/06/12 Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Charge Account

 \square Debts to pension or profit-sharing plans, and other similar debts

Document Page 25 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.1 \$361.00 Comenity Bank/nwyrk&co 3688 Last 4 digits of account number 4 Nonpriority Creditor's Name Opened 10/05 Last Active 220 W Schrock Rd When was the debt incurred? 7/15/17 Westerville, OH 43081 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 Comenitybk/victoriasec 2210 \$277.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/12 Last Active Po Box 182789 6/08/17 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.1 Depondon Collection Service, Inc. 9933 \$60.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P. O. Box 4833 When was the debt incurred? Oak Brook, IL 60522-4833 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No
□ Yes

report as priority claims

Other. Specify

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Document Page 26 of 60 Case number (if know) Debtor 1 Aimee M Martin 4.1 **Discover Fin Svcs Llc** 7322 \$2,393.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/16 Last Active Pob 15316 When was the debt incurred? 8/01/17 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes **Dsnb Macys** 6290 \$206.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Opened 09/08 Last Active Po Box 8218 When was the debt incurred? 6/26/17 Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4 1 **Express** 6867 \$1,281.80 Last 4 digits of account number Nonpriority Creditor's Name P.O BOX 659728 When was the debt incurred? San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify

☐ Debts to pension or profit-sharing plans, and other similar debts

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Case number (if know)

Debtor 1 Aimee M Martin 4.2 Harris & Harris, LTD 2462 \$125.24 Last 4 digits of account number 0 Nonpriority Creditor's Name 111 W. Jackson Blvd. When was the debt incurred? Suite 400.00 Chicago, IL 60604-4135 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Healthcare Assoc Cr Un 0165 \$7,055.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/13 Last Active 1151 E Warrenville Rd When was the debt incurred? 6/23/17 Naperville, IL 60563 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.2 4001 \$228.00 I C System Inc Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **Opened 11/15** Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Collection Attorney Southwest** Other. Specify Dermatology- Orland ☐ Yes

Document Page 28 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.2 J.b. Robinson Jewelers 2686 \$0.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 05/95 Last Active 375 Ghent Rd When was the debt incurred? 3/04/07 Fairlawn, OH 44333 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.2 Katerji Pediatric Neurology 3981 \$60.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 3727 Oak Brook, IL 60522-3727 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 \$3.189.00 Kohls/capone 4132 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 06/10 Last Active N56 W 17000 Ridgewood Dr When was the debt incurred? 7/11/17 Menomonee Falls, WI 53051 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

■ Other. Specify Charge Account

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

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Debtor 1 Aimee M Martin Case number (if know) 4.2 Macys 6290 \$165.42 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O.BOX 78008 When was the debt incurred? Phoenix, AZ 85062-8008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Malcolm S. Gerald & Associates 0041 \$23.13 Last 4 digits of account number Nonpriority Creditor's Name 332 S. Michigan, Suite 600 When was the debt incurred? Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Med Busi Bur 4573 \$168.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 1460 Renaissance Dr When was the debt incurred? **Opened 05/16** Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify Ltd

Collection Attorney Midwest Anesthesia

4.2 9	Medical Recovery Speciali	ists, LLC.	Last 4 digits of acco	unt number	8742		
Debtor 1	Aimee M Martin		Document	raye su	O of 60 Case number (if know)		
	Case 17-29142	Doc 1			ed 09/29/17 08:44:	19 I	Desc Main

4.2 9	Medical Recovery Specialists, LLC.	Last 4 digits of account number 8742	\$140.00
	Nonpriority Creditor's Name 2250 E. Devon Ave. Ste. 352 Des Plaines, IL 60018-4521	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 0	Midwest Anesthesiologists Nonpriority Creditor's Name	Last 4 digits of account number 3679	\$168.00
	3407 Momentum PI. Chicago, IL 60689-5334	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3 1	Midwest Diagnostic Pathology, SC	Last 4 digits of account number 0763	\$21.18
	Nonpriority Creditor's Name P.O. Box 578	When was the debt incurred?	
	Park Ridge, IL 60068-0578	Their was the dest mounted:	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	

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Document Page 31 of 60 Debtor 1 Aimee M Martin Case number (if know) 4.3 Neurologic Associates, LTD 4029 \$223.96 Last 4 digits of account number 2 Nonpriority Creditor's Name 11824 Southwest Hwy When was the debt incurred? Palos Heights, IL 60463-1083 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 **New York and Company** 3688 \$316.99 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 659728 When was the debt incurred? San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Schlee & Stillman, LLC 3474 \$228.57 Last 4 digits of account number Nonpriority Creditor's Name 50 Tower Office Park When was the debt incurred? Woburn, MA 01801 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Page 32 of 60 Case number (if know) Debtor 1 Aimee M Martin 4.3 Standard Bk 0610 \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name Opened 6/29/10 Last Active 2400 W 95th St When was the debt incurred? 1/13/17 Evergreen Park, IL 60642 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Real Estate Specific ☐ Yes 4.3 Syncb/jcp 9101 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 03/96 Last Active Po Box 965007 When was the debt incurred? 2/13/06 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 Victorias Secret 2210 \$235.08 Last 4 digits of account number Nonpriority Creditor's Name P.O. BOX 659728 When was the debt incurred? San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debt	or 1 Aimee M Martin		Case number (if know)	
4.3 8	Visiting Physician Association	Last 4 digits of account number	0283	\$35.55
0]	Nonpriority Creditor's Name 121 Fairfield Way Suite 207	When was the debt incurred?		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Bloomingdale, IL 60108-1559 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
	Yes	Other. Specify		
4.3 9	Wells Fargo Dealer Svc	Last 4 digits of account number	9657	\$0.00
9]	Nonpriority Creditor's Name	- Last 4 digits of account number		40.00
	Po Box 1697 Winterville, NC 28590	When was the debt incurred?	Opened 02/13 Last Active 1/14/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Automobile	9	
4.4 0	Women's Health Institute of Illinoi Nonpriority Creditor's Name	Last 4 digits of account number	5483	\$1,051.96
	P.O. Box 29 Chicago Ridge, IL 60415-0029	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	ng plans, and other similar debts	
	☐ Yes	Other Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Aimee M Martin

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	\$	Total Claim
Total claims	Oi.	otacii ioans	Oi.	Ψ	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	24,976.62
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	24,976.62

		1700.000	III FAUE 33 01 00	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Aimee M Martin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit Name, Numb	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

		Docume	ent Page 36 d	or h()	
Fill in this i	nformation to identify your				
Debtor 1	Aimee M Martin				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
-		NORTHERN DISTRICT			
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				Charle if this is an
(II KIIOWII)					☐ Check if this is an amended filing
					3
Official	Form 106H				
Schedu	ule H: Your Cod	ebtors			12/15
ill it out, and our name a	d number the entries in the and case number (if known)	boxes on the left. Attach . Answer every question	n the Additional Page t	to this page. On the top	eeded, copy the Additional Page, p of any Additional Pages, write
1. Do yo	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
	n the last 8 years, have you, California, Idaho, Louisiana				y states and territories include
_	Go to line 3.				
☐ Yes.	Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
_	olumn 1: Your codebtor me, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, line	е
	ame			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
N	umber Street				
Ci	ty	State	ZIP Code		
3.2				☐ Schedule D, line	Δ
	ame			Schedule E/F, I	
				☐ Schedule G, lin	
Ni	umber Street			_	
Ci		State	ZIP Code		

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Debtor 1	Aimee M Martin	
Debtor 2 (Spouse, if filing)		
United States Ba	nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	orm 106I	MM / DD/ YYYY
Schedule	: I: Your Income	12/15

spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Fundament status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Critical Care Tech	
	Include part-time, seasonal, or self-employed work.	Employer's name	Advocate Christ Medical	
	Occupation may include student or homemaker, if it applies.	Employer's address	4440 W. 95th Street Oak Lawn, IL 60453	
		How long employed the	nere? 11 years	

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 3,295.28 deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 3,295.28 0.00

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Aimee M Martin		(Case	number (if known)				
					Foi	Debtor 1		Debtor filing s	2 or	
	Сор	y line 4 here	4.		\$_	3,295.28	\$		0.00	
5.	List	all payroll deductions:								
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$	695.45 0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c		\$ -	93.64	\$—		0.00	=
	5d.	Required repayments of retirement fund loans	5d		\$ -	0.00	\$		0.00	
	5e.	Insurance	5e) .	\$	403.06	\$		0.00	
	5f.	Domestic support obligations	5f.		\$	0.00	\$		0.00	=
	5g.	Union dues	5g	١.	\$	0.00	\$		0.00	•
	5h.	Other deductions. Specify:	5h	1.+	\$	0.00	+ \$		0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,192.15	\$		0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,103.13	\$		0.00	_
8.	List 8a. 8b. 8c.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8a 8b		\$_ \$_	0.00 0.00	\$ \$		0.00	
		regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	: .	\$	2,899.00	\$		0.00	
	8d.	Unemployment compensation	8d	Ι.	\$	0.00	\$		0.00	
	8e.	Social Security	8e).	\$	0.00	\$		0.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g	١.	\$_ \$_	0.00 0.00	\$ \$		0.00 0.00	
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$_	0.00	+ \$		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	2,899.00	\$		0.00)
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		5,002.13 + \$		0.00	= \$	5,002.13
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		· -		-			' -	0,0020
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			•		chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	5,002.13
13	Dov	you expect an increase or decrease within the year after you file this form	?					l	Combir	ned y income
10.	=	No.	•							
	$\overline{}$	Yes Explain:								

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Fill	in this informa	tion to identify yo	our case:			l		
Deb		Aimee M Mai				Che	ck if this is:	
		Allilee IVI IVIA					An amended filing	
	tor 2 buse, if filing)						A supplement show 13 expenses as of	ving postpetition chapter
(Spc	ouse, ii iiiing)						13 expenses as or	the following date.
Unit	ed States Bankr	uptcy Court for the	NORTH	IERN DISTRICT OF ILLI	NOIS		MM / DD / YYYY	
1	e number							
(If kı	nown)							
Of	fficial Fo	rm 106J				•		
S	chedule	J: Your I	Exper	ises				12/1
Be	as complete a	and accurate as	possible eded, atta	If two married people a				
Par		ibe Your House	hold					
1.	Is this a join							
	■ No. Go to	line 2. s Debtor 2 live i	in a senar	ate household?				
	ss. 2 ss							
			st file Offici	al Form 106J-2, <i>Expense</i>	es for Separate House	ehold of Del	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents				Son		15	Yes
					San		40	□ No
					Son			■ Yes □ No
					Son		22	■ Yes
								□ No
2	De veur evr	anaaa inaluda	_					☐ Yes
3.	expenses of	enses include f people other tl	han _	No				
	yourself and	d your depende	nts? ⊔	Yes				
	imate your ex		our bankr	uptcy filing date unless				apter 13 case to report f the form and fill in the
app	licable date.							
				government assistance luded it on <i>Schedule I:</i>				
	ficial Form 10		u nave m	iluded it on <i>Schedule I.</i>	rour income		Your exp	enses
	The newfol o		h:		La abanda Cart as autoro a	. –		
4.		nd any rent for the		ses for your residence. r lot.	include first mortgage	e 4.	\$	1,051.50
	If not includ	led in line 4:						
		estate taxes				4a.	·	0.00
		rty, homeowner's		's insurance Ipkeep expenses		4b. 4c.	·	55.16 0.00
		maintenance, re owner's associat				40. 4d.		210.00
5.				our residence, such as h	ome equity loans	5.		0.00

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Aimee M Martin	Case number (if known)	
Jtilities:		
Sa. Electricity, heat, natural gas	6a. \$	320.00
6b. Water, sewer, garbage collection	6b. \$	85.00
Sc. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	420.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	800.00
Childcare and children's education costs	8. \$	200.00
Clothing, laundry, and dry cleaning	9. \$	260.00
Personal care products and services	10. \$	50.00
Medical and dental expenses	11. \$	160.00
Fransportation. Include gas, maintenance, bus or train fare.	Ψ	
Do not include car payments.	12. \$	420.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	150.00
Charitable contributions and religious donations	14. \$	80.00
nsurance.	<u> </u>	23.00
Do not include insurance deducted from your pay or included in lines 4 or 20.		
5a. Life insurance	15a. \$	0.00
5b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	104.66
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		3.00
Specify:	16. \$	0.00
nstallment or lease payments:		3.00
17a. Car payments for Vehicle 1	17a. \$	255.98
17b. Car payments for Vehicle 2	17b. \$	0.00
7c. Other. Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
four payments of alimony, maintenance, and support that you did not report as	·	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	
Other real property expenses not included in lines 4 or 5 of this form or on School	-	
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	
	· <u> </u>	0.00
Other: Specify: Grooming	21. +\$	120.00
Pet Vet/Grooming	+\$	100.00
pass	+\$	80.00
alculate your monthly expenses		
22a. Add lines 4 through 21.	\$	4,922.30
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	7,322.30
		4 000 00
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,922.30
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	5,002.13
23b. Copy your monthly expenses from line 22c above.	23b\$	4,922.30
Sopy your monthly expended from the 220 above.		+,3∠∠.30
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$	79.83
To you expect an increase or decrease in your expenses within the year after you or example, do you expect to finish paying for your car loan within the year or do you expect you addition to the terms of your mortgage?		ease or decrease because
No.		

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Fill in this infor	mation to identify your	case:			
Debtor 1	Aimee M Martin				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official Forr					
Declarat	ion About a	ın Individual	Debtor's Sc	hedules	12/15
You must file thi obtaining money years, or both. 1	s form whenever you fi	n connection with a bank	or amended schedules.	Making a false staten	nent, concealing property, or , or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorr	ney to help you fill out ba	ankruptcy forms?	
■ No					
☐ Yes. N	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sumr	nary and schedules filed	I with this declaration	and
X /s/ Aim	nee M Martin		X		
	M Martin		Signature of I	Debtor 2	

Date

Signature of Debtor 1

Date September 29, 2017

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Fill in	this inform	nation to identify you	case:			
Debtor	· 1	Aimee M Martin				
		First Name	Middle Name	Last Name		
Debtor (Spouse		First Name	Middle Name	Last Name		
Linitad	States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Officeu	States Dai	ikruptcy Court for the.	NORTHERN DISTRICT	OI ILLIIVOIO		
Case r (if known	number _				_	Check if this is an amended filing
		rm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/10
nforma	ation. If m r (if knowr	ore space is needed, i). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write yo	
		current marital statu	rital Status and Where Yous?	u Liveu Beiore		
■	Married Not mar	ried				
2. Du	ıring the la	st 3 years, have you	lived anywhere other than	where you live now?		
	No Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	not include where you live nov	v.	
D	ebtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
					nity property state or territor ico, Texas, Washington and V	
	No					
	Yes. Ma	ke sure you fill out Sch	nedule H: Your Codebtors (C	Official Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
Fil	I in the tota	I amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including part ye together, list it only once u		ndar years?
	No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until	■ Wages, commissions, bonuses, tips	\$22,161.15	☐ Wages, commissions, bonuses, tips	
tne da	•		borracco, tipo			

Official Form 107

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Case number (if known)

Document Debtor 1 Aimee M Martin

					Debtor 1					Debtor 2		
						of income that apply.	(bet	oss income fore deductions lusions)	and	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			lar year: December 3	31, 2016)	■ Wages bonuses,	s, commissions, tips		\$62,173	3.00	☐ Wages, combonuses, tips	missions,	
					☐ Opera	ting a business				☐ Operating a	business	
			ar year bef December 3		■ Wages bonuses,	s, commissions, tips		\$60,663	3.00	☐ Wages, combonuses, tips	missions,	
					☐ Opera	ting a business				☐ Operating a	business	
	and ot winnin	ther p ngs. If ach s No	oublic benefi you are filin	it payments; ng a joint cas ne gross inco	pensions; re e and you h	me is taxable. Exa ental income; inter nave income that y ich source separat	rest; di you rec	vidends; money ceived together,	collecte list it on	ed from lawsuits; ly once under De	royalties; and ebtor 1.	ecurity, unemployment, I gambling and lottery
					Debtor 1					Debtor 2		
					Sources of Describe b		eac (bet	oss income from th source fore deductions lusions)		Sources of inc Describe below		Gross income (before deductions and exclusions)
Par	t 3:	List	Certain Pay	ments You	Made Befo	re You Filed for I	Bankrı	uptcy				
6.		No.	Neither De individual p During the No. Yes * Subject t Debtor 1 o	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include o adjustment r Debtor 2 o 90 days befo	personal, for you filed to editor. Do n payments to on 4/01/19 r both have re you filed to you filed to the have re you	for bankruptcy, di r to whom you pai ot include paymen o an attorney for the and every 3 years or primarily consu for bankruptcy, di	d you put d a total to for a total tota	lebts. Consume cose." pay any creditor al of \$6,425* or domestic support support case. that for cases filebts. pay any creditor	more in rt obliga	of \$6,425* or mo one or more pay tions, such as ch r after the date o	re? rments and th ild support ar f adjustment.	(8) as "incurred by an le total amount you and alimony. Also, do
			⊔ Yes		ments for d							creditor. Do not nclude payments to an
	Cred	itor's	Name and	Address		Dates of payme	ent	Total amou	unt aid	Amount you still owe	Was this p	ayment for

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Case number (if known) Document Debtor 1 Aimee M Martin

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No Yes, List all payments to an insider.	artners; relatives of any gen a control, or owner of 20% o	eral partners; partners of their votin	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
		. ,	paid	still owe		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer	any property on a	count of a d	ebt that benefited an
	No☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Par	t 4: Identify Legal Actions, Repossession	ns. and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	cy, were you a party in an				
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below.		erty repossessed,	foreclosed, garnis	hed, attached	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	i			
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed No Yes. Fill in the details.	ause you owed a debt?		nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date :	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the bene	efit of creditors, a
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:					

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14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankrup or gambling?	tcy or	since you filed for bankruptcy, did you lose any	thing because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	how the loss occurred	Include	ibe any insurance coverage for the loss ethe amount that insurance has paid. List pending noe claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
	□ No ■ Yes. Fill in the details.		rs, or credit counseling agencies for services require	, , ,	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	211	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Office Of Frank L. Vosholler III 611 Rodney Ct. Lockport, IL 60441 Lockport, IL 60441 flv@frankvlaw.com	Ju	Attorney Fees	2016	\$1,000.00
	Credit Infonet 4540 Honeywell Ct. Dayton, OH 45424		\$195 for credit reports, tax transcripts, auto valuation, credit counseling classes, valuation of home.	2016	\$195.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credi Do not include any payment or transfer that y	itors o		or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Aimee M Martin

18.	Within 2 years before you filed for bankruptor transferred in the ordinary course of your burnelinclude both outright transfers and transfers mainclude gifts and transfers that you have already No										
	☐ Yes. Fill in the details. Person Who Received Transfer Address	Description and v		payme	ibe any property or ents received or debts n exchange	Date transfer was made					
	Person's relationship to you			paid ii	i excilarige						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No		y property to a	self-settle	d trust or similar device	of which you are a					
	Yes. Fill in the details.										
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made					
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and St	orage Unit	s						
20	Within 1 year before you filed for bankrupte	v wore ony financial co	ocunto or instr	umanta ha	ld in vour name, or for w	our banafit alacad					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	J.		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)			Do you still have it?					
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?										
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	to it? Address (Number, Street, City,		the contents	Do you still have it?					
Par	t 9: Identify Property You Hold or Control	for Someone Fise									
23.			ude any proper	ty you borr	owed from, are storing	for, or hold in trust					
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value					
	the purpose of Part 10, the following definition										

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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Debtor 1 **Aimee M Martin**

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

	 Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. 								
Rep	port all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.						
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	under or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any	release of hazardous material?							
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	■ No □ Yes. Fill in the details.								
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	rt 11: Give Details About Your Business or Con	nections to Any Business							
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have an	y of the following connections to any	business?					
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)						
	☐ A partner in a partnership								
	☐ An officer, director, or managing execut	tive of a corporation							
	☐ An owner of at least 5% of the voting or	equity securities of a corporation							
	No. None of the above applies. Go to Part	12.							
	Yes. Check all that apply above and fill in the		3 .						
	•••	escribe the nature of the business	Employer Identification number						
	Address (Number, Street, City, State and ZIP Code)	me of accountant or bookkeeper	Do not include Social Security Dates business existed	number or ITIN.					
28.	Within 2 years before you filed for bankruptcy, of institutions, creditors, or other parties.	did you give a financial statement t	to anyone about your business? Inclu	ide all financial					
	■ No								
	Yes. Fill in the details below.								
	Name Address (Number, Street, City, State and ZIP Code)	te Issued							

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-29142 Doc 1 Filed 09/29/17 Entered 09/29/17 08:44:19 Desc Main Page 48 of 60 Case number (if known) Document

Debtor 1 Aimee M Martin

/S/ AI	mee M Martin		
Aimee M Martin		Signature of Debtor 2	
Signa	ture of Debtor 1		
Date	September 29, 2017	Date	
Did yo	u attach additional pages to Your Sta	ntement of Financial Affairs for Individuals Filing for Bankruptcy (Official Fo	orm 107)?
No			
110			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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		200	amone rago to or oo	
Fill in this infor	mation to identify your	case:		
Debtor 1	Aimee M Martin			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIS	TRICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
00000	400			
Official Fo				_
<u>Statemer</u>	nt of Intentio	n for Indiv	/iduals Filing Under Chapt	er 7 12/15
	todalora I (Climor on Januaria		III and this farm if	
	ividual filing under cha e claims secured by yo		li out this form if:	
_	e claims secured by you		at avaired	
You must file thi	is form with the court wever is earlier, unless th	ithin 30 days after	you file your bankruptcy petition or by the date s te time for cause. You must also send copies to the	
	eople are filing togethe	in a joint case, bo	oth are equally responsible for supplying correct	information. Both debtors must
	and accurate as possib our name and case nur		s needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit		art 1 of Schedule D	Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	editor and the property t	hat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's A	American Honda Fina	nce	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	
Description of	2015 Honda Civic	18101 miles	Retain the property and enter into a Reaffirmation Agreement.	■ Yes
property securing debt:	Value based on kb	b.com	☐ Retain the property and [explain]:	_
Creditor's F	First Midwest Bank/na	a	☐ Surrender the property.	□ No

Part 2: List Your Unexpired Personal Property Leases

Description of 41 Sorrento Dr. Palos Heights,

Townhouse

IL 60463 Cook County

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

☐ Retain the property and redeem it.

Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

Describe your unexpired personal property leases

Will the lease be assumed?

Yes

Official Form 108

name:

property

securing debt:

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Debtor 1 Aimee M Martin	Case number (if known)
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	y property of my estate that secures a debt and any personal
X /s/ Aimee M Martin X	nature of Debtor 2
Date September 29, 2017 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-29142 Doc 1 Filed 09/29/17 Entered 09/29/17 08:44:19 Desc Main Document Page 55 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Aimee M Martin		Case N	0.	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy,	or agreed to be pa	aid to me, for service	
	For legal services, I have agreed to accept		s	1,000.00	
	Prior to the filing of this statement I have received			1,000.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	unless they are me	embers and associate	es of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the same copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement, together with a list of the national copy of the agreement.				ny law firm. A
5.	In return for the above-disclosed fee, I have agreed to re-	ender legal service for all aspect	s of the bankrupto	y case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to a 	tement of affairs and plan which ors and confirmation hearing, ar reduce to market value; exe	may be required; and any adjourned lemption planning	nearings thereof;	nd filing of
	reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho		and filing of m	otions pursuant t	:0 11 USC
б.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.	e does not include the following schargeability actions, judie	service: cial lien avoida	nces, relief from	stay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of an pankruptcy proceeding.	y agreement or arrangement for	payment to me for	or representation of t	he debtor(s) in
	September 29, 2017	/s/ Frank L. Vosh	oller III		
1	Date (Frank L. Vosholle Signature of Attorne The Law Office of 17726 Oak Park A	y f Frank L. Vosh	oller III	
		Unit J Tinley Park, IL 60 708-341-2060 Fa		3	
		flv@frankvlaw.co			
		мате от там тігт			

United States Bankruptcy Court Northern District of Illinois

In re	Aimee M Martin		Case No.	
		Debtor(s)	Chapter	7
	VE	RIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors:	40
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credito	rs is true and	correct to the best of my
Date:	September 29, 2017	/s/ Aimee M Martin Aimee M Martin Signature of Debtor		

ACL Laboratories P.O. Box 27901 West Allis, WI 53227-0901

Advocate Christ Medical Center P.O. Box 4256 Carol Stream, IL 60197-4256

American Honda Finance 2170 Point Blvd Ste 100 Elgin, IL 60123

Bby/cbna Po Box 6497 Sioux Falls, SD 57117

Buckle P.O. BOX 659704 San Antonio, TX 78265-9704

Capital One Po Box 30253 Salt Lake City, UT 84130

Cbna Po Box 6282 Sioux Falls, SD 57117

Chase Auto Po Box 901003 Ft Worth, TX 76101

Citi Po Box 6241 Sioux Falls, SD 57117

Comenity Bank/buckle Po Box 182789 Columbus, OH 43218

Comenity Bank/express Po Box 182789 Columbus, OH 43218 Comenity Bank/limited Po Box 182789 Columbus, OH 43218

Comenity Bank/nwyrk&co 220 W Schrock Rd Westerville, OH 43081

Comenitybk/victoriasec Po Box 182789 Columbus, OH 43218

Depondon Collection Service, Inc. P. O. Box 4833 Oak Brook, IL 60522-4833

Discover Fin Svcs Llc Pob 15316 Wilmington, DE 19850

Dsnb Macys Po Box 8218 Mason, OH 45040

Express
P.O BOX 659728
San Antonio, TX 78265-9728

First Midwest Bank/na 300 N Hunt Club Rd Gurnee, IL 60031

Harris & Harris, LTD 111 W. Jackson Blvd. Suite 400.00 Chicago, IL 60604-4135

Healthcare Assoc Cr Un 1151 E Warrenville Rd Naperville, IL 60563

I C System Inc

J.b. Robinson Jewelers 375 Ghent Rd Fairlawn, OH 44333

Katerji Pediatric Neurology P.O. Box 3727 Oak Brook, IL 60522-3727

Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051

Macys P.O.BOX 78008 Phoenix, AZ 85062-8008

Malcolm S. Gerald & Associates 332 S. Michigan, Suite 600 Chicago, IL 60604

Med Busi Bur 1460 Renaissance Dr Park Ridge, IL 60068

Medical Recovery Specialists, LLC. 2250 E. Devon Ave. Ste. 352 Des Plaines, IL 60018-4521

Midwest Anesthesiologists 3407 Momentum Pl. Chicago, IL 60689-5334

Midwest Diagnostic Pathology, SC P.O. Box 578 Park Ridge, IL 60068-0578

Neurologic Associates, LTD 11824 Southwest Hwy Palos Heights, IL 60463-1083

New York and Company P.O. BOX 659728 San Antonio, TX 78265-9728

Schlee & Stillman, LLC 50 Tower Office Park Woburn, MA 01801

Standard Bk 2400 W 95th St Evergreen Park, IL 60642

Syncb/jcp Po Box 965007 Orlando, FL 32896

Victorias Secret P.O. BOX 659728 San Antonio, TX 78265-9728

Visiting Physician Association 121 Fairfield Way Suite 207 Bloomingdale, IL 60108-1559

Wells Fargo Dealer Svc Po Box 1697 Winterville, NC 28590

Women's Health Institute of Illinoi P.O. Box 29 Chicago Ridge, IL 60415-0029